

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
OLPE CLASSIFIER			
FORMALITY REVIEW	SA	20	6/20
RESPONSE FORMALITY REVIEW	CC	561114	8-7-9 10-25-01

09/877,259

INDEX OF CLAIMS

✓ _____ Rejected N _____ Non-elected
 - _____ Allowed I _____ Interference
 - (Through summary) Cancelled A _____ Appeal
 + _____ Restricted O _____ Objected

Claim	Date	Claim	Date	Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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10/1/01
10/1/01